Description of Service

Alberta Health Services (AHS) Medical Staff who are specialists in Adult or Pediatric Respiratory Medicine and have privileges in AHS facilities provide safe, high-quality care for patients across the Province. Respiratory Medicine is the medical subspecialty concerned with the study and clinical management of the respiratory system in health and disease, and the prevention of respiratory disease.¹

For a full list of clinical privileges, please refer to the attached Respiratory Medicine Clinical Privilege List on page 5.

Zone	Department(s)	Section(s)
South	Medicine	Medicine
Calgary	Internal Medicine; Pediatrics	Respirology; Pediatric Respirology
Central	Internal Medicine	Respirology
Edmonton	Medicine; Child Health	Respirology; Pediatric Respirology
North	Hospital Health	Internal Medicine

Zone Medical Staff Organization

College of Physicians and Surgeons of Alberta (CPSA) Requirements

The CPSA grants practice permits but does not grant any additional practice approvals for specific procedures or specialties beyond those stated on the practice permit.

A practice permit from the CPSA does not guarantee that an individual will be granted for an AHS Medical Staff appointment or privileges. It is AHS's role and responsibility to screen and evaluate the qualifications of Practitioners in relation to the specific procedures and patient care services they will be providing at specific sites before granting an appointment and clinical privileges.

Physicians with expertise in a particular area of practice may require a CPSA approval process separate from the CPSA licensure and AHS privileging process for specific services. These

¹ Royal College of Physicians and Surgeons of Canada – Objectives of Training in the Subspecialty of Respiratory Medicine 2011

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services typically fall into the non-invasive diagnostics group. Please refer to the CPSA website for a list of practice areas requiring approval <u>http://www.cpsa.ca/accreditation/physician-approvals/.</u>

Minimum Education and Training Requirements

The "Minimum Education and Training Requirements" set out in the AHS List of Respiratory Medicine Clinical Privileges are as follows:

1. Appropriate licensure with the College of Physicians and Surgeons of Alberta,

AND

- 2. Credentials satisfactory to the Zone Clinical Department Head (ZCDH), Zone Application Review Committee (ZARC) and/or the Chief Medical Officer (CMO), including:
- 3.
- Successful completion of a Royal College of Physicians and Surgeons of Canada (RCPSC) accredited adult or pediatric Respiratory Medicine residency program and fellowship in the RCPSC (FRCPC); OR
- o Equivalent combination of education, training and experience satisfactory to the ZCDH, ZARC and/or CMO.

These are minimum requirements. The ZCDH, ZARC and/or the CMO may determine that additional education, training or experience is required. The ZCDH, ZARC and/or CMO may also determine that an individual has developed competency in a particular area, without having completed a fellowship in that area, through an equivalent combination of education, training and experience. In addition to the minimum requirements listed above, additional education, training, experience and certification may be required to be granted certain clinical privileges. These specifics are identified in the attached clinical privileges list.

Privileges Requiring Additional Education, Training and Experience

The list identifies privileges that require additional specialty training and documentation of evidence that the practitioner has received recognized postgraduate education, training or an appropriate level of experience to safely provide the service.

Clinical Privilege List and Medical Staff Bylaws

The AHS Medical Staff Bylaws state that the clinical privileges granted to a Practitioner define the diagnostic or therapeutic Procedures or other Patient care services a Practitioner is deemed competent to perform, the Facility(ies) and Zone(s) within which the Practitioner is eligible to

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provide care and services to Patients; and the specified AHS Programs and Professional services...that the Practitioner is eligible to access.²

No recommendation on Clinical Privileges is meant to prevent any licensed Practitioner from performing any medical procedure on any person in a situation where failure to perform that procedure may result in death, injury, or harm to the person.³

Nothing in this document or the attached List of Clinical Privileges replaces the processes or requirements set out in the AHS Medical Staff Bylaws and Rules. This document and its attachments are intended to supplement and more fully describe the application of the AHS Bylaws and Rules in the context of Respiratory Medicine Clinical Privileges.

The AHS Medical Staff Bylaws and Rules can be found on the AHS website at <u>http://www.albertahealthservices.ca/7086.asp.</u>

Interpretation of the Clinical Privilege List

The following list describes and reflects the categories/types of patient services included in the scope of Respiratory Medicine privileges available to members of the AHS Medical Staff with the necessary and required education, training, and experience. When granted, Respiratory Medicine privileges include the capability to perform the noted procedure using various techniques and approaches as appropriate for the patient, unless a specific technique or approach is specified. The Zone Clinical Department Head's recommendation regarding specifics of an individual's privileges and any associated techniques will be provided to ZARC and the CMO for their consideration.

The Medical Staff Rules define the minimum review period for the privilege list.⁴

Sites of Clinical Privileges

A delineation of the sites of clinical activity is a required component of clinical privileges (AHS Medical Staff Bylaws, 3.2.1(c) and 3.2.7).

Clinical privileges will reflect the site (or sites) where the Physician physically provides the clinical services. A Physician privileged in the specialty may have clinical privileges at multiple sites if they travel to multiple sites to provide clinical services as approved by the ZCDH, ZARC, and/or the CMO. Privileges granted may only be exercised at the site(s) and/or setting(s) that have sufficient space, equipment, staffing, and other resources required to support the privilege.

² AHS Medical Staff Bylaws 3.0.2

³ AHS Medical Staff Rules 3.4.3(e)

⁴ AHS Medical Staff Rules, 3.4.3(f)(ii)).

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	Site A	Site B	Site C	Site D	Site E
Privilege 1					
Privilege 2					
Privilege 3					
Privilege 4					

The table above indicates what privileges are available at which sites:

- Privilege 1 is available at all sites
- Privilege 2 is available at sites A, C,D and E
- Privilege 3 is available at sites A and C
- Privilege 4 is available at sites B, D and E

Proctoring Requirements

The Zone Clinical Department Head may determine that a period of proctoring is required in certain situations. Proctoring can be defined as follows:

"The term *proctor* is often used to mean observe, supervise, mentor, monitor, or directly assess...*proctoring* reflects a process by which an individual is reviewed and evaluated over time to ensure competence, and proctor identifies the person performing the assessment." *The Medical Staff Handbook, A Guide to Joint Commission Standards, Second Edition.*

"Proctoring is a process of direct observation that allows for the focused evaluation of current physician competency in carrying out actual clinical care and takes both cognitive and procedural abilities into account. If the proctor observes potential or imminent patient harm during the proctoring process, it may be ethically appropriate for him or her to intervene." *Proctoring and FPPE: Strategies for Verifying Physician Competence, Second Edition. Robert J. Marder, MD, CMSL, and Mark A. Smith, MD, MBA, CMSL.*

Clinical Privilege List

Respiratory Medicine Privileges				
General Privileges				
	Admitting privilege (includes; assessment, evaluating, consulting, diagnosing, treating and surgical assistance)			
	Consultation privilege (Includes; conduct history and assessment for the purpose of making recommendations related to care and treatment)			
Clin	Clinical Privileges			
	Bronchial removal of foreign body			
	Chemical pleurodesis			
	Chest tube insertion			
	Drainage of pneumothorax			
	Insertion, management, and removal of arterial lines			
	Insertion, management, and removal central venous catheters			
	Intrapleural fibrinolytic therapy			
	Invasive ventilator management			
	Flexible bronchoscopic procedures			
	Fine needle superficial lymph node aspiration and biopsy			
	Fine needle lung or mucosal aspiration and biopsy			
	Nasociliary brushing or biopsy			
	Nasopharyngoscopy			
	Non-invasive ventilator management			
	Pleural biopsy			
	Pleural drainage			
	Pleural or chest ultrasonography			
	Sleep monitoring and polysomnography interpretation			
	Tracheotomy tube replacement			
	Transbronchial aspiration and biopsy			

Privileges requiring additional education, training and experience: the below listed privileges require education, training and experience in addition to the successful completion of the Fellowship/Residency program.

Clinical Privilege		Required additional education, training and experience
	Balloon bronchoplasty	Demonstrated currency in core pleural procedures to satisfy the ZCDH.
	Bronchial thermoplasty	Demonstrated training and experience to satisfy ZCDH.
	Cryosurgery	Demonstrated training and experience to satisfy ZCDH.
	Electrocoagulation	Demonstrated training and experience to satisfy ZCDH.
	Endobronchial stent placement and management	Demonstrated training and experience to satisfy ZCDH.
	Endobronchial ultrasound (EBUS) (ADULT ONLY)	Successful completion of an accredited RCPSC (or equivalent) postgraduate training program that included training in EBUS or completion of a hands-on continuing medical education program.
	Fluoro-guided bronchoscopy	Demonstrated training and experience to satisfy ZCDH.
	Infant lung function testing (PEDS ONLY)	Demonstrated training and experience to satisfy ZCDH.
	Percutaneous lung biopsy	Demonstrated training and experience to satisfy ZCDH.
	Placement of endobronchial valves	Demonstrated training and experience to satisfy ZCDH.
	Pulmonary function tests / exercise testing (consistent with accredited level of lab)	CPSA approval required.
	Point of care ultrasound	Demonstrated training and experience to satisfy the ZCDH.
	Procedural sedation	Compliance with the AHS Procedural Sedation Policy (PS-21) and Procedure (PS-21-01)5. Demonstrated combination of education, training and/or experience in conscious sedation to satisfy the ZCDH.
	Right heart catheterization (ADULT ONLY)	Demonstrated training and experience to satisfy ZCDH.
	Rigid bronchoscopy	Demonstrated training and experience to satisfy ZCDH.
	Sleep monitoring (Level 1 – polysomnography, monitored)	Demonstrated training and experience to satisfy ZCDH.
	Sleep monitoring (Level 2 – polysomnography, unmonitored)	Demonstrated training and experience to satisfy ZCDH.

Privileges requiring additional education, training and experience: the below listed privileges require education, training and experience in addition to the successful completion of the Fellowship/Residency program.		
	Sleep monitoring (Level 3 – home sleep apnea testing) (ADULT ONLY)	Demonstrated training and experience to satisfy ZCDH.
	Tunneled pleural catheter placement	Demonstrated training and experience to satisfy ZCDH.
	Use of endobronchial laser	Demonstrated training and experience to satisfy ZCDH.